**Subject:** Infant Food Packages - Breastfeeding Infants

**Effective Date:** September, 2017 **Revised from:** October 1, 2015

**Policy:** Fully (exclusively) breastfed infants will not receive formula and staff shall not offer formula to a breastfed infant. If requested or medically necessary, after the infant is one month old a partial food package of formula up to the limits for a mostly breastfeeding food package may be issued and the infant considered mostly breastfed. Local Agencies must provide a primary contract infant formula unless a special formula is prescribed by a health care professional (See policy [FCI: 02.01.05 Infant Food Packages-Special Formula](#)).

If any formula is issued to an infant under 1 month of age only 1 month worth of benefits may be issued. The breastfeeding mother and her baby should be scheduled for an individual nutrition education appointment to assess the breastfeeding status and formula intake before issuing more benefits for the Dyad.

**Reference:** 7 CFR §246

**Procedure:**

1. Prescribe an age and situation-appropriate food package for the infant.

2. The base food package for both the infant and mother is determined based on the Breastfeeding Status selected on the Health Interview window in KWIC. See Policy [FCI:02.03.02 – Food Packages for Breastfeeding Women](#).

3. The breastfeeding statuses and base food packages for the dyad are:
   - **Exclusively** – breastfed infant receiving no formula from WIC
     - The mother of a single exclusively breastfeeding infant should receive Food Package 7a – Excl BF or Mostly BF/PG >1.
     - The mother of multiple exclusively breastfeeding infants should receive Food Package 7b – Excl BF mult.
   - The base food packages for an **Exclusively** Breastfed infant are:
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<table>
<thead>
<tr>
<th>Basket</th>
<th>Food Package 1-BF Excl Breastfed &lt; 6 mo old</th>
<th>Food Package 2a-BF Excl Breastfed 6-9 mo old</th>
<th>Food Package 2b-BF Excl Breastfed 9-12 mo old</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infant Cereal</td>
<td>NA-only priceless breastmilk</td>
<td>24 ounces Infant Cereal</td>
<td>24 ounces infant cereal</td>
</tr>
<tr>
<td>Baby Food Fruits and Vegetables</td>
<td>64 - 4 oz. containers</td>
<td>64 – 4 oz. containers</td>
<td></td>
</tr>
<tr>
<td>Baby Food Meats</td>
<td>31 – 2.5 oz. containers</td>
<td>31 – 2.5 oz. containers</td>
<td></td>
</tr>
<tr>
<td>Fresh FVB*</td>
<td></td>
<td>$8 substituted for 32 – 4 oz. containers of baby food fruits and vegetables</td>
<td></td>
</tr>
</tbody>
</table>

* The food package for a 9 through 12 month exclusively breastfeeding infant may be tailored to include a fruit and vegetable cash value benefit (FVB) for the purchase of fresh fruits and vegetables only. Caregivers must be trained on safe food preparation, storage and feeding practices before the FVB is issued.

Document education on safe food preparation, storage and feeding practices in KWIC as the topic “Making Baby Food” or the handout “Homemade Baby Food.” “Homemade Baby Food” handout available on the WIC Publications Order Form or at:

- **Mostly** - breastfed infant receiving a small amount of formula from WIC. Before selecting the Mostly breastfed status on the infant’s Health Interview window in KWIC, inform the breastfeeding woman that receiving formula from WIC will reduce her own WIC food package.
  - The mother of a single mostly breastfed infant should receive Food Package 5 – Pregnant or Mostly BF.
  - The mother of multiple mostly breastfeeding infants from the same pregnancy should receive Food Package 7a – Excl BF or Mostly BF/PG >1.
  - The Mostly Breastfeeding Food Package is not available for infants up to 1 month of age. Refer to the” Breastfeeding Talking Points – no formula first month of life” section of this policy for counseling suggestions.
  - The base food packages for a Mostly Breastfed Infant between 1 and 12 months of age are:
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<table>
<thead>
<tr>
<th>Basket</th>
<th>Food Package 1b-Mostly BF Mostly BF 1, 2 &amp; 3 mo old</th>
<th>Food Package 1c-Mostly BF Mostly BF 4 &amp; 5 mo old</th>
<th>Food Package 2a Mostly BF Mostly BF 6-9 mo old</th>
<th>Food Package 2b Mostly BF Mostly BF 9-12 mo old</th>
</tr>
</thead>
<tbody>
<tr>
<td>Similac Advance Powder</td>
<td>Priceless Breastmilk and up to 4 cans Similac Advance Powder (12.4 oz container)</td>
<td>Priceless Breastmilk and up to 5 cans Similac Advance Powder (12.4 oz container)</td>
<td>Priceless Breastmilk and up to 4 cans Similac Advance Powder (12.4 oz container)</td>
<td>Priceless Breastmilk and up to 4 cans Similac Advance Powder (12.4 oz container)</td>
</tr>
<tr>
<td>Infant Cereal</td>
<td>24 ounces Infant Cereal</td>
<td>24 ounces Infant Cereal</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Baby Food Fruits and Vegetables</td>
<td>32 – 4 ounce containers baby food – fruits and vegetables</td>
<td></td>
<td>32 – 4 ounce containers baby food – fruits and vegetables</td>
<td></td>
</tr>
<tr>
<td>Fresh FVB*</td>
<td>$4 substituted for 16 – 4 oz. containers of baby food fruits and vegetables</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

* The food package for a 9 through 12 month mostly breastfeeding infant may be tailored to include a fruit and vegetable cash value benefit (FVB) for the purchase of fresh fruits and vegetables only. Caregivers must be trained on safe food preparation, storage and feeding practices before the FVB is issued.

Document education on safe food preparation, storage and feeding practices in KWIC as the topic “Making Baby Food” or the handout “Homemade Baby Food.” “Homemade Baby Food” handout available on the WIC Publications Order Form or at: http://www.kansaswic.org/download/nutritionedumaterials/Homemade%20baby%20food%2010-14.pdf

- **Limited** – breastfed infant receiving more than a specified amount of formula from WIC.
  Before selecting the **Limited** breastfed status on the infant’s Health Interview window in KWIC, inform the breastfeeding woman that receiving that much formula from WIC will reduce her own WIC food package even further.
  - The mother of a limited breastfeeding infant less than 6 months of age should receive Food Package 6 – Limited BF or PP.
  - The mother of a limited breastfeeding infant 6 months of age and older will not receive a food package. She is still eligible for nutrition education, health referrals and other WIC benefits.
  - The base food packages for a Limited Breastfed Infant are:
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<table>
<thead>
<tr>
<th>Basket</th>
<th>Food Package 1a-Limited BF</th>
<th>Food Package 1b-Limited BF</th>
<th>Food Package 1c-Limited BF</th>
<th>Food Package 2a Limited BF</th>
<th>Food Package 2b Limited BF</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Limited BF &lt; 1 mo old</td>
<td>Limited BF 1, 2 &amp; 3 mo old</td>
<td>Limited BF 4 &amp; 5 mo old</td>
<td>Limited BF 6-9 mo old</td>
<td>Limited BF 9-12 mo old</td>
</tr>
<tr>
<td>Similac Advance Powder</td>
<td>Priceless Breastmilk and 1 to 9 cans Similac Advance Powder (12.4 oz container)</td>
<td>Priceless Breastmilk and 6 to 10 cans Similac Advance Powder (12.4 oz container)</td>
<td>Priceless Breastmilk and 5 to 7 cans Similac Advance Powder (12.4 oz container)</td>
<td>Priceless Breastmilk and 5 to 7 cans Similac Advance Powder (12.4 oz container)</td>
<td>Priceless Breastmilk and 5 to 7 cans Similac Advance Powder (12.4 oz container)</td>
</tr>
<tr>
<td>Infant Cereal</td>
<td></td>
<td></td>
<td></td>
<td>24 ounces Infant Cereal</td>
<td></td>
</tr>
<tr>
<td>Baby Food Fruits and Vegetables</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fresh FVB*</td>
<td></td>
<td></td>
<td></td>
<td>$4 substituted for 16 – 4 oz. containers of baby food fruits and vegetables</td>
<td></td>
</tr>
</tbody>
</table>

* The food package for a 9 through 12 month limited breastfeeding infant may be tailored to include a fruit and vegetable cash value benefit (FVB) for the purchase of fresh fruits and vegetables only. Caregivers must be trained on safe food preparation, storage and feeding practices before the FVB is issued.

Document education on safe food preparation, storage and feeding practices in KWIC as the topic “Making Baby Food" or the handout "Homemade Baby Food." "Homemade Baby Food" handout available on the WIC Publications Order Form or at: [http://www.kansaswic.org/download/nutritionedumaterials/Homemade%20baby%20food%2010-14.pdf](http://www.kansaswic.org/download/nutritionedumaterials/Homemade%20baby%20food%2010-14.pdf)
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- **Stopped** – infant is no longer breastfed. The mother and infant will receive the same food packages as described above for limited breastfed.

- **Never**-infant was never breastfed. The mother and infant will receive the same food packages as described above for limited breastfed.

4. Tailor the base food package, as necessary, to prescribe an age and situation-appropriate food package.

5. Base food packages are tailored by selecting the desired food item from each food category basket.
   - For infants only formula and the baby food/fresh fruit and vegetable options may be tailored.
   - KWIC will suggest an amount of formula based upon the specific formula and the amount provided in a 24-hour period.
   - Refer to the “Guidelines for providing Powdered Formula to Breastfeeding Infants” section of this policy.

6. The Mostly Breastfeeding formula basket and contents are:

<table>
<thead>
<tr>
<th>Mostly Breastfeeding Formula Basket</th>
<th>Maximum Amount</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Food Package 1b-Mostly BF</td>
</tr>
<tr>
<td></td>
<td>Mostly BF 1, 2 &amp; 3 mo old</td>
</tr>
<tr>
<td>Formula</td>
<td>Yield</td>
</tr>
<tr>
<td>Similac Advance Powder (12.4 oz container)</td>
<td>90 oz</td>
</tr>
<tr>
<td>Gerber Good Start Soy Powder (12.9 oz container)</td>
<td>91 oz</td>
</tr>
</tbody>
</table>
7. The Limited Breastfeeding formula basket and contents are:

<table>
<thead>
<tr>
<th>Formula</th>
<th>Yield</th>
<th>1a-Limited BF Limited BF &lt; 1 mo old</th>
<th>1b-Limited BF Limited BF 1, 2 &amp; 3 mo old</th>
<th>1c-Limited BF Limited BF 4 &amp; 5 mo old</th>
<th>2-Limited BF Limited BF 6 - 12 mo old</th>
</tr>
</thead>
<tbody>
<tr>
<td>Similac Advance Powder</td>
<td>90 oz</td>
<td>1-9 cans</td>
<td>5-9 cans</td>
<td>6-10 cans</td>
<td>5-7 cans</td>
</tr>
<tr>
<td>(12.4 oz container)</td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Gerber Good Start Soy</td>
<td>91 oz</td>
<td>1-9 cans</td>
<td>5-9 cans</td>
<td>6-10 cans</td>
<td>5-7 cans</td>
</tr>
<tr>
<td>Powder (12.9 oz container)</td>
<td></td>
<td></td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>
Guidelines for providing Powdered Formula to Breastfeeding Infants

Formula should NEVER be offered for a breastfeeding infant. It may only be issued when requested by the breastfeeding woman. Before providing formula to a breastfed infant:

Inform the breastfeeding woman that supplementing with formula will reduce her milk supply and decrease the nutritional, developmental, and protective health benefits her baby receives from breastfeeding, especially during the first weeks after birth when her milk supply is not fully established.

Inform the breastfeeding woman of the behavioral and emotional support available to her through WIC and/or other community resources.

Provide assessment and assistance to determine the actual need for formula and the minimum amount necessary. If a mother reports she is breastfeeding and offering formula, before issuing formula:

- determine why formula is being used or requested;
- consider the age of the infant; and
- the amount of formula being routinely offered.

If there are no medical indications for formula use for a breastfed infant under 1 month of age, address the mother’s concerns so that the mother can receive an Exclusively Breastfeeding food package. Refer to the Breastfeeding Talking Points—“no formula first month of life” section of this policy for counseling suggestions.

If formula is issued to an infant under 1 month of age (Limited Breastfeeding food package) only 1 month worth of benefits may be issued. The breastfeeding mother and her baby should be scheduled for an individual nutrition education appointment to assess the breastfeeding status and formula intake before issuing more benefits for the Dyad. Especially assess if formula use has decreased and the mother may be assigned a food package with more food.

Provide education to address concerns. Provide ways to increase milk supply. Provide information about exclusively breastfeeding to increase milk supply. Provide education on breastmilk hand expression. Evaluate need for WIC to provide a breast pump. (See policy NED 05.04.00 Breastfeeding Equipment)

If there are medical indications for formula use, prescribe an age and situation-appropriate food package containing a primary contract infant powdered formula. Powdered formula is the only formula provided to a partially breastfed infant because it can be reconstituted in small quantities, which is safer and more convenient for supplementation.

Maternal medical indications for formula use include but are not limited to:

- Breast surgery
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- Breast anatomical challenges (tubular breasts, marked breast asymmetry, inverted nipples)
- Perinatal complications
- Endocrine abnormalities
- Contraindicated medication

Infant medical indications for formula use include but are not limited to:
- Prematurity
- Excessive weight loss
- Hypoglycemia
- Inborn errors of metabolism (PKU)

The CPA must document in the infant’s KWIC record the reason a breastfeeding infant is issued formula.

Use the following chart as a guide when issuing powdered formula to breastfeeding infants in order to support breastfeeding and not give more formula than needed.

**Note** – One 12.4 oz. can powdered Similac Advance provides about 90 fluid oz.
One 12.9 oz. can powdered Enfamil ProSobee provides about 92 fluid oz.

<table>
<thead>
<tr>
<th>Formula used daily</th>
<th># 12.4 oz cans needed</th>
</tr>
</thead>
<tbody>
<tr>
<td>Up to 3 ounces</td>
<td>1 can</td>
</tr>
<tr>
<td>4 to 6 ounces</td>
<td>2 cans</td>
</tr>
<tr>
<td>7 to 9 ounces</td>
<td>3 cans</td>
</tr>
<tr>
<td>10 to 12 ounces</td>
<td>4 cans</td>
</tr>
<tr>
<td>13 to 15 ounces</td>
<td>5 cans</td>
</tr>
<tr>
<td>16 to 18 ounces</td>
<td>6 cans</td>
</tr>
<tr>
<td>19 to 21 ounces</td>
<td>7 cans</td>
</tr>
<tr>
<td>22 or more ounces</td>
<td>8 cans</td>
</tr>
</tbody>
</table>

9 cans will yield approximately 27 ounces of formula/day
Breastfeeding Talking Points – no formula first month of life

Moms come to WIC clinics to be certified as breastfeeding and often want a can of formula “just in case.” Introduction of artificial baby milk in the first month is detrimental to breastfeeding duration.

- Be sure moms know how much more food they receive as an exclusively breastfeeding mother. See [http://www.kansaswic.org/WIC_approved_foods/packages_exclusively.html](http://www.kansaswic.org/WIC_approved_foods/packages_exclusively.html)

- What if a mom says “I don’t have enough milk.” This is the most frequent reason to ask for artificial baby milk and/or to stop breastfeeding. Use open ended questions to determine just what she means. “Why do you think you do not have enough milk?” And don’t forget to affirm. “Lots of moms worry about having enough milk.”
  - Review hunger cues, assess latch, can the mom hear swallowing?
  - Review infant stomach size – mom is making just enough milk for her baby.
  - Ensure that the baby is eating often enough – 8 times in 24 hours for infants less than 3 weeks old is really a minimum number of feedings. 10-12 feedings in 24 hours is better – make sure moms know feedings are not as frequent as baby gets older. Catch phrase – “8 or more in 24.”
  - The fact that we can’t see what goes in bothers moms and dads and grandparents. Explain that we can see what comes out – review wet and poopy diaper expectations. Use the Mother Baby Log.
  - Offer to weigh and measure baby frequently and print off growth chart to send home with mother.
  - Discuss supply and demand – if artificial baby milk (ABM) is offered and a feeding skipped, the breastmilk supply is reduced. Use the quart jar or salt shaker example from the New Employee Breastfeeding Training.
    - Teach hand expression – hand massage while breastfeeding and hand expression between nursing sessions is very effective in increasing breastmilk supply. Refer clients to this video - [http://newborns.stanford.edu/Breastfeeding/HandExpression.html](http://newborns.stanford.edu/Breastfeeding/HandExpression.html)
    - The mom may need a breastpump for power pumping – a multi-user breastpump is the best option to increase breastmilk supply. See the Breastfeeding Challenges module under training on the Kansas WIC website. [http://www.kansaswic.org/](http://www.kansaswic.org/)

- What if a mom says “My baby acts hungry all the time.” “He goes to sleep at the breast but as soon as I lay him down he wakes up and wants to eat.” “If I offer a bottle after I nurse, he drinks the whole thing.”
  - Review frequency of nursings, hunger cues, infant tummy size.
  - Discuss sleep – it takes about 30 minutes for an infant to go into a deep sleep so if an infant falls asleep at the breast and the mom puts the baby down right away he will wake up. What do babies want for comfort? Mom and breastmilk or at least a nice warm body to be close to. Suggest the mom nurse and if the baby goes to sleep at the breast very gently pass the baby to dad, grandma, grandpa or some other willing baby holder to hold the baby for the next 30 minutes until the baby is sound asleep.
  - Discuss how easy it is to overfeed and show mom or dad the proper way to bottle feed when it is appropriate to offer a bottle of breastmilk. Gavage feeding is not a good idea for babies and that is what a baby held in the cradle position with head slanted down and a vertical bottle does. Train upright baby and horizontal bottle. View [https://www.youtube.com/watch?v=UH4T70OSzGs](https://www.youtube.com/watch?v=UH4T70OSzGs)

Remember use 3-Step Counseling!! Open Ended Questions, Affirmation, Education
Breastfeeding Talking Points – no formula first month of life

- Remind mothers that babies cry for many reasons besides hunger – I want to be held; I’m stressed; My diaper is icky. Anyone can solve these problems and skin-to-skin is wonderful for baby and any adult (Grandma, Grandpa, Dad…)

  - What if a mom says “My baby seems to sleep longer when I offer formula.”
    - Define sleeping through the night – it is not 8 hours. 5 hours would be a long sleep.
    - Discuss that breastmilk is very easily digested and the nutrients quickly pass through the baby’s gut and into their body for growth and brain cell development.
    - ABM digests slowly so it sits in the stomach – baby’s brain cells and other cells are not getting the nutrients (they are hungry) but the baby feels full.

  - What is mom says “I’m going back to work.”
    - Encourage mom to nurse frequently to establish a good milk supply. She can pump in between and freeze the milk if she desires.
    - Offer a bottle at about 3 weeks of age and then once weekly thereafter. Have someone else offer the bottle to make it easier for the infant to accept. Tricks for bottle acceptance – offer when baby first shows hunger cues. Wrap baby and bottle in a blanket or tshirt that smells like mom. Warm milk to the temperature of breastmilk. Parents may need to try different bottle types and nipples.
    - The paced feeding technique should be used when offering a bottle. View https://www.youtube.com/watch?v=UH4T70OSzGiew
    - The mom should pump at the time the bottle of milk is offered.

  - What if mom says “Her dad wants to give her a bottle.”
    - Encourage mom to nurse frequently the first few weeks to develop a good milk supply – then in a few weeks there will be plenty of milk and she can hand express or pump and others can feed a bottle. If a bottle is offered, the mom should be pumping at that time.
    - Have dad hold baby after nursing until baby is in deep sleep.
    - Encourage dad to interact with baby in other nurturing ways – skin-to-skin, hold baby and talk, hold baby and read out loud…. Dads don’t just want to change diapers.
    - Discuss how easy it is to overfeed and show mom and dad the proper way to bottle feed when it is appropriate to offer a bottle of breastmilk. See above for tips on offering a bottle.

  - What if mom says “My mother says he’s not getting enough.”
    - Affirmation – “It is hard to know how much a breastfed baby is getting.” or “Lots of grandparents worry about that.”
    - Discuss stomach size and frequency of feedings.
    - Offer to weigh and measure baby frequently and print off growth chart to send home with mother.
    - The fact that we can’t see what goes in bothers moms and dads and grandparents. Explain that we can see what comes out – review wet and poopy diaper expectations. Perhaps if grandma is at the house, she can keep track of the number of wet and poopy diapers.

More to say:
- Any ABM introduced to an infant allows bacteria and bad bugs to invade the babies intestinal

Remember use 3-Step Counseling!! Open Ended Questions, Affirmation, Education
• ABM fed babies are frequently overfed. Parents can’t bear to waste the ABM and force feed the entire amount in the bottle – 6 ounces when the baby only wants 2. ABM fed infants get 90,000 more calories in the first year of life than a baby exclusively breastfed for one year. This equals more risk of obesity.
• ABM fed preemies have a lower IQ than breastfed preemies.
• Working parents of babies fed ABM have to take more sick days to deal with an ill baby than parents of exclusively breastfed babies.